
2015 MOM AND POP GRANT PROGRAM DISTRICT 11

Brought to you by:



Juan C. Zapata
Commissioner

and supported by the following community partners:



TABLE OF CONTENTS

	<u>PAGE</u>
BRIEF DESCRIPTION OF MOM AND POP GRANT.....	3
DISTRICT 11 ELIGIBILITY GUIDELINES.....	4
DISTRICT 11 APPLICATION.....	7
APPLICATION CHECKLIST.....	13
REQUEST FOR OPINION.....	14
JOB COMPLIANCE FORM.....	15

MOM AND POP GRANT DESCRIPTION

Miami-Dade County created the Mom and Pop Small Business Grant Program in 1999 in order to provide financial and technical assistance to promising small businesses. The Program provides small businesses the opportunity to interact with local government under favorable conditions while bridging the gap between the two entities.

The Program provides financial assistance to further the economic viability of recipients. Funding can be used for the following purchases:

- inventory/supplies,
- business equipment,
- marketing/advertising,
- building/business insurance,
- minor interior/exterior renovations,
- security systems,
- work vehicles (pick-up truck or cargo van),
- professional services (accounting services, business training)

Technical assistance is made available to small businesses in order to create a better working and business environment, promote economic development opportunities, educate owners about various county-funded programs and projects, form/foster better working relationships among small business owners, retain and eventually create more jobs, offer the necessary training that small business owners so desperately need to become more efficient and competitive, etc.

The program is offered in every Miami-Dade County Commission District and application requirements vary by District. In order to receive the correct eligibility and application requirements to be considered for funding, you must apply in the Commission District where your business is located.

To locate the District where your business is located, please visit www.miamidade.gov/commission/ and type your business address into the space provided under “Who Is My Commissioner?” or dial 3-1-1 to speak to a Government Information Center representative.

DISTRICT 11 ELIGIBILITY GUIDELINES

Mandatory Informational Meeting:

TWO MANDATORY introductory workshops will be held on **March 15, 2015** at 12:00 PM and **March 22, 2015** at 12:00 PM at:

Florida International University College of Law
11200 S.W. 8th Street
RDB 1000
University Park, FL 33199

Attendance at both workshops is **REQUIRED** for all applicants and failure to attend will result in a disqualification.

Eligibility:

Commissioner Juan C. Zapata is offering Mom and Pop Business Grants to small businesses located in District 11 that meet the following criteria:

- Business must be a for-profit business
- Business must not have more than seven full-time employees (two part-time employees will count as 1 full-time employee)
- Business must not be a part of a national or regional chain.
- Business must include a physical address. P.O. Boxes are not allowed.
- Business must be willing to work with the following community partners: FIU Small Business Development Center, FIU Law, HBIF, and SCORE.

Businesses who meet the eligibility requirements may apply for funding up to \$15,000. In order to receive the maximum grant amount of \$15,000, applicant must commit to creating a new job and complete job compliance form on page 15.

In addition to the above requirements, there will be a **STRONG PREFERENCE** for those businesses that meet the below criteria.

- Businesses which have been in operation for at least 3 years
- Businesses that have a commercial storefront or office space
- Businesses that commit to creating a new job

Application Procedures:

- Application must be typed or printed in English.
- Applicant must submit one original completed application with all required documents.



- Applicant must submit Federal Tax Returns for 2012 and 2013. Please remove all social security numbers before submitting application.
- Applicant must submit proof of the day in which the business began to operate. Applicant may submit any of the following to fulfill this requirement:
 - o A license issued to the business
 - o A Florida Division of Corporations print out that evidences an incorporation date
 - o A sales tax receipt or utility bill issued to the business
- Applicant must submit a copy of an active State of Florida registration and/or fictitious name. A FEI/EIN number must be listed on your State of Florida SunBiz printout if your business is incorporated.
- Applicant must provide a copy of a driver's license or State-issued identification card.
- Applicant must submit a business plan (five-page maximum).
- Applicant must submit a photo of the exterior of business location.
- Applicants that are elected officials, government board appointees, or Miami-Dade County employees must get written approval stating no conflict of interest exists from the Miami-Dade County Commission on Ethics.
- Applicant must submit a copy of Miami-Dade County Local Business Tax Receipt. If not applicable, a signed statement from the Miami-Dade County Tax Collector's Department stating that the tax is inapplicable.
- Applicant must complete job certification if committing to create a new job.
- The Selection Committee has the right to request additional information, accept, or reject any and all applications, as well as create a special pilot project.

Automatic Disqualification:

- Businesses that relocate out of the District either during the selection process or during the year following the approval of the grant.
- Businesses who received a Mom and Pop Grant in the previous application cycle.
- Applications submitted on behalf of a non-profit agency.
- Multiple submissions on behalf of the same business.
- Failure to attend the mandatory workshops.

Deadlines:

- The application period will be open from Monday, March 2nd until Friday, March 27th at 5:00 pm. **No late applications will be accepted under any circumstance.**
- Completed applications must be received at either:
 - o Florida International University College of Law, Attn: Zoraya Ledesma, 11200 S.W. 8th Street, RDB 1010, University Park, FL 33199 **OR**
 - o Office of Commissioner Juan C. Zapata, Attn: Dan Chatlos, 8785 SW 165th Ave., Suite 203, Miami, FL 33193



Eligible Use of Funding:	Ineligible Use of Funding:
Inventory and Supplies	Rent/Lease or Mortgage
Business Equipment	Rental Deposits
Marketing/Advertising	Late Payment Fees
Liability Insurance	Purchase of Alcohol, Tobacco, or Medicine
Minor Interior/Exterior Renovations	Salaries
Security System	Debts
Work Vehicle	Utility Bills
Professional Services (accounting, business training, seminars, etc.)	Any and all other uses not listed in the eligible use section.

DISTRICT 11 MOM AND POP APPLICATION FORM

Please fill in the requested information in Parts A, B, C, D, E, and F completely. The Selection Committee may decline incomplete applications at its sole discretion. All information provided in this application, including attachments, is subject to verification throughout the grant application and administration process.

If you have any questions regarding the application form or process, please contact Daniel Chatlos by phone at 305-375-5511 or by e-mail at chatlos@miamidade.gov. It is the sole responsibility of the applicant to obtain the information needed to submit this application prior to the application deadline. Late applications will not be accepted.

A. BUSINESS CONTACT INFORMATION

Business Name (as it appears on incorporation or Sunbiz)	
Business Street Address	
City & Zip Code	
Business Phone Number	
Applicant Cell Phone Number	
Business E-mail Address	
Business Fax Number	
Type of Business	
President or Owner Name	
President or Owner Home Address	
City & Zip Code	

B. BUSINESS DESCRIPTION: If more space is needed, please continue your response on additional pages and attach to your application.

1. Please describe your Business:

2. What kind of goods or services does your business offer to the community?

3. What goals do you have for your business?

4. Briefly describe how the funds, if awarded, would be used to help grow your business:

5. List the names and titles of your management team and their years of experience in this field:

<u>NAME</u>	<u>TITLE</u>	<u>YEARS OF EXPERIENCE</u>

C. ADDITIONAL BUSINESS INFORMATION:

1. How long have you been in business?

YEARS _____ **MONTHS** _____

2. How many employees does your business currently have?

FULL TIME _____ and **PART TIME** _____

3. Have you received a Mom and Pop grant in the past?

YES _____ **NO** _____

If YES, when _____

4. Are you or any of the shareholders of your business employed by Miami-Dade County?

YES _____ **NO** _____

If YES, what Department? _____

5. If awarded the grant, would you be willing to work with community partners on the implementation of your business plan?

YES _____ **NO** _____

6. If awarded the full amount allowed by the program, would your business be able to create a new job?



YES _____ NO _____

If YES, please explain how

below _____

D. EMPLOYEE ROSTER

Employee Name	Date of Hire	Job Title	Full Time (FT)/ Part Time (PT)

E. FUNDING REQUEST:

Requested Funding Amount	\$
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**How will you use the
funding?** _____

F. CERTIFICATION:

I hereby certify that the information provided is true and correct. I acknowledge that the information is subject to verification by authorized government officials and program administrators. I further acknowledge that I am a United States citizen and am otherwise eligible to receive Miami-Dade County grant assistance to the best of my knowledge.

SIGNATURE: _____

PRINTED NAME: _____

BUSINESS NAME: _____

TITLE: _____

DATE: _____

APPLICATION CHECKLIST

Check	Requirement	Reference
	One original and complete application	Page 4-9
	Proof of Date Business Began Operation	Page 5
	Copy of Miami-Dade County Local Business Tax Receipt. If not applicable, a signed statement from the Miami-Dade County Tax Collector's Department stating that the tax is inapplicable.	Page 5
	Copy of active State of Florida Corporation and/or fictitious name	Page 5
	Copy of government issued photo identification	Page 5
	Photo of business location (if applicable)	Page 5
	Copy of Federal Tax Returns for 2012 and 2013 (if applicable)	Page 5
	Copy of Miami-Dade Commission on Ethics Opinion, (if applicable)	Pages 5, 11
	Copy of Proposed Business Plan	Page 5
	Notarized Job Compliance Form, if committing to create a new job	Pages 4, 12



**Request for Opinion from Commission on Ethics
Acquiring Financial Interest**

I, _____, the owner or president of

(Owner or President Name)

_____, whose business address is

(Business Name)

(Business Address, City, State, Zip)

Are you currently an employee of Miami Dade County? Yes:____ No: ____

If yes, what Department? _____

I am being considered for funding through the Mom and Pop Small Business Grant Program and request the clearance from the Commission on Ethics. Please review my request and forward to the Office of Commissioner Juan C. Zapata to the attention of Daniel Chatlos, 8785 SW 165th Ave., Suite 203, Miami, FL 33193 or fax (305) 408-2585. Thank you in advance for your attention to this very important matter.



JOB COMPLIANCE FORM**STATE OF FLORIDA**)**COUNTY OF MIAMI-DADE**)

Being duly sworn, on my oath declares: That, I, _____ agree to create one new full-time or part-time job for a low to moderate income person if awarded the maximum amount under the Mom And Pop Small Business Grant Program within six months of my receipt of such award. If I fail to create the required new job within the agreed upon time period I will be in non-compliance and will be required to pay the entire amount of the grant back to Miami-Dade County.

IN WITNESS WHEREOF, I, _____, the undersigned

Owner of _____, have signed this

JOB COMPLIANCE FORM on this _____ day of _____, 2015, and acknowledged the same to be my act.

The foregoing instrument was acknowledged before me this _____ day of

_____, 2015 by _____, who personally appeared

Signature

before me at the time of notarization, and who is personally known to me or who produced a FLORIDA DRIVER'S LICENSE as identification.

NOTARY PUBLIC:

SIGN: _____

PRINT: _____

STATE OF FLORIDA AT LARGE

